## AMENDMENTS TO THE SPECIFICATION

Amend the abstract of the disclosure (57) as shown below:

ABSTRACT

~~In one aspect the~~ The present invention relates to a method of expressing an immunotoxin in *Pichia pastoris* strain mutated to toxin resistance comprising a) growing the Pichia pastoris in a growth medium comprising an enzymatic digest of protein and yeast extract and maintaining a dissolved oxygen concentration at 40% and above; and b) performing methanol induction with a limited methanol feed of 0.5-0.75 ml/min/IO L of initial volume during induction along with a continuous inusion of yeast extract at a temperature below 17.5° c., antifoaming agent supplied up to 0.07%, agitation reduced to 400 RPM, and the induction phase extended out to 163 h. ~~In another aspect, the present invention relates to a method of purifying a nonglycosylated immunotoxin comprising a) loading a solution containing the nonglycosylated immunotoxin onto a hydrophobic interaction column; b) obtaining a first non-glycosylated immunotoxin containing eluant from the hydrophobic interaction column; c) loading the non-glycosylated immunotoxin containing eluant from step (b) onto an anion exchange column; d) obtaining a second non-glycosylated immunotoxin containing eluant from the anion exchange column by eluting the non-glycosylated immunotoxin with a sodium borate solution; e) diluting the concentration of sodium borate in the second non-glycosylated immunotoxin containing eluant from step (d) to about 50 mM or less; f) concentrating the diluted non-glycosylated immunotoxin containing eluant from step (e) over an anion exchange column; and g) obtaining a purified non-glycosylated immunotoxin from the anion exchange column.~~

Amend paragraph [0006] as shown below:

[0006] Transplant tolerance remains an elusive goal for patients and physicians whose ideal would be to see a successful, allogenic organ transplant performed without the need for indefinite, non-specific maintenance immunosuppressive drugs and their attendant side effects. Many of these patients have been treated with cyclosporin, azathioprine, and prednisone with a variety of other immunosuppressive agents being used for induction or maintenance immunosuppression. The average aunual cost of maintenance immunosuppressive therapy in the United States is approximately $11,000 (Immunosuppressive Drugs Coverage Act, National Kidney Foundation, available at ~~http://~~www.kidney.org/general/pubpol/immufact.cfm). While these agents are effective in preventing rejection, the side effects of immunosuppressive therapy are considerable. Immunosuppressive therapy induces nonspecific unresponsiveness of the immune system. Recipients are susceptible to infection and there is a risk of malignancy such as in the form of post transplant lymphoproliferative disorders. A major goal in transplant imununobiology is the development of specific immunologic tolerance to organ transplants with the potential of freeing patients from the side effects of continuous pharmacologic immunosuppression and its attendant complications and costs.